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]	Report #1 - Due Augu	ust 31, 2004	ļ			0	er	
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allot Ad	vocacy Groups (BAGs) only:	Period:	Dec. 5, 2002 - Aug	26, 2004		S	ECRET	N HELLER ARY OF STAT
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	CONTRIBUTIONS	SUMMA	₹Y					Cumulative From Beginning of Report Perlo #1 through End of This Reporting
1.	Total Monetary Contributions I	Received in Ex	cess of \$100		. dan strikk i "	124	000	Period 7060,00
2.	Total Monetary Contributions I	Received of \$1	100 or Less		-	ľ	0,00	0.00
	Total Amount of Monetary C	· antella di ana	This Period	Beginni Report I	Period #1 1 End of			
	Received	ontributions						
٠.	/A dal I ! 4 1 6\	utions D!	.		_	1260	0,00	7060,00
	(Add Lines 1 and 2)	utions Receive	d in	م ای	Cv.			
	Total Value of In Kind Contribu		0,0	- 1				
	Total Value of In Kind Contributions of \$100							
	Total Value of In Kind Contribu							
	Total Value of In Kind Contribu		EXPENSES		Y			
	Total Value of In Kind Contribu Excess of \$100		EXPENSES		www.	2000	.00	2000.00
4. 5.	Total Value of In Kind Contribu Excess of \$100 Total Monetary Expenses Paid	d in Excess of	EXPENSES		www.	2000		2000,00
4. 5. 6.	Total Value of In Kind Contribu Excess of \$100 Total Monetary Expenses Paid Total Monetary Expenses Paid Total Amount of All Monetary	d in Excess of	EXPENSES \$100 ss		•		,00	,00
4.5.6.7.	Total Value of In Kind Contribu Excess of \$100 Total Monetary Expenses Paid Total Monetary Expenses Paid Total Amount of All Monetary (Add Lines 5 and 6)	d in Excess of I of \$100 or Le y Expenses P	EXPENSES \$100 ss aid	SUMMAR	•	2000		
4.5.6.7.	Total Value of In Kind Contribu Excess of \$100 Total Monetary Expenses Paid Total Monetary Expenses Paid Total Amount of All Monetary	d in Excess of I of \$100 or Le y Expenses P	EXPENSES \$100 ss	SUMMAR	•		,00	,00
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4. 5. 6. 7.	Total Value of In Kind Contribution Excess of \$100 Total Monetary Expenses Paid Total Monetary Expenses Paid Total Amount of All Monetary (Add Lines 5 and 6) Total Value of In Kind Expenses	d in Excess of I of \$100 or Le y Expenses P	EXPENSES \$100 ss aid	SUMMAR	-		,00	,00
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4. 5. 6. 7. 8.	Total Value of In Kind Contribut Excess of \$100 Total Monetary Expenses Paid Total Monetary Expenses Paid Total Amount of All Monetary (Add Lines 5 and 6) Total Value of In Kind Expense of \$100	d in Excess of I of \$100 or Le y Expenses P es in Excess	EXPENSES \$100 ss aid AFFIRM	SUMMAR	-		,00	,00

Revised: Jan-04

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CITIZENS AND TAXPAGERS POLITICAL ACTION COMMITTEE

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
LARRY M. BITTON 381 NORLINA COURT HENDERSON, NV89016	08/31/04	40,00	
ıı	09/15/04	40.00	
l (09/30/04	40.00	
11	10/18/04	40.00	-
RUBERT TO DODSON 3728 PROSPERTOR CARSON LITY, NV 89703	08/31/04	5D. 00	
<i>'</i> (09/15/54	50.00	
ι ₍	09/30/04	50.00	
l ₍	10/18/04	50.00	
LIJA M. FREESTONE 10769 CHILINGHAH DRIVE LAS VEGAS, NV 89123	08/32/04	25.00	
ι (09/15/04	25,00	
ι (09/30/04	25,00	
(į	10/18/04	25,00	
VERNON R. HARKINS 1618 BROADHODRCT BOLLDERCHYNV 89005	08/31/04	25.00	
ų	09/15/04	25.00	
ч	09/30/04	25.00	
4	10/18/54	25.00	

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CITIZENS AND	TAXPAYERS	POLITICAL ACTION	COMMITTEE
Name (print)	0	ffice (if applicable)	District (if applicab

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
UAMNE E. HORLARHER 127 SANDY HOOK TORRACE HENDERSON, NV 89052	08/31/04	57,00	
l (09/15/04	50.00	
lί	09/30/04	50,00	
11	10/18/04	SD:00	
CHARLES D. KIRCHER 325 MONTCLIFF AVENUE HENDERSON, NV 89074	0x/31/04	50.00	
, (09/15/04	50.00	
l ₍	09/30/04	50.00	
l _t	10/18/04	50.00	
MICHAEL W. MCPALL 980 CAMEUA ORIVE INENDERWON, NV89015	08/31/04	75.00	
. (09/15/04	75.00	
"(09/30/04	15.00	
Eq.	10/18/04	75,00	
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CHIZENS	AND	MARAGERS	POLITICAL.	ACTION	COMMITTEE
Name (print)			ice (if applicable)		Diel

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)			
FRIENDS OF CHIP HAXPIEU 3900 PARADLERD STE 110 LAS VEGAS, NI 89109	POUTKAL CONTRI	10/20/04 BUTTOD	2000.00
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